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## A BILL TO BE ENTITLED

1	AN ACT	

- 2 relating to level of care designations for hospitals that provide
- 3 neonatal and maternal services.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
- 5 SECTION 1. Chapter 241, Health and Safety Code, is amended
- 6 by adding Subchapter H to read as follows:
- 7 SUBCHAPTER H. HOSPITAL LEVEL OF CARE DESIGNATIONS FOR NEONATAL AND
- 8 <u>MATERNAL CARE</u>
- 9 Sec. 241.181. DEFINITIONS. In this subchapter:
- 10 (1) "Department" means the Department of State Health
- 11 Services.
- 12 (2) "Executive commissioner" means the executive
- 13 <u>commissioner of the Health and Human Services Commission.</u>
- 14 Sec. 241.182. LEVEL OF CARE DESIGNATIONS. (a) The
- 15 <u>executive commissioner</u>, in accordance with the rules adopted under
- 16 Section 241.183, shall assign level of care designations to each
- 17 hospital based on the neonatal and maternal services provided at
- 18 the hospital.
- 19 (b) A hospital may receive different level designations for
- 20 neonatal and maternal care, respectively.
- Sec. 241.183. RULES. (a) The executive commissioner, in
- 22 consultation with the department, shall adopt rules:
- (1) establishing the levels of care for neonatal and
- 24 maternal care to be assigned to hospitals;

- 1 (2) prescribing criteria for designating levels of
- 2 neonatal and maternal care, respectively, including specifying the
- 3 minimum requirements to qualify for each level designation;
- 4 (3) establishing a process for the assignment of
- 5 levels of care to a hospital for neonatal and maternal care,
- 6 respectively;
- 7 (4) establishing a process for amending the level of
- 8 care designation requirements, including a process for assisting
- 9 facilities in implementing any changes made necessary by the
- 10 <u>amendments;</u>
- 11 (5) dividing the state into neonatal and maternal care
- 12 regions;
- 13 (6) facilitating transfer agreements through regional
- 14 coordination;
- 15 (7) requiring payment, other than quality or
- 16 outcome-based funding, to be based on services provided by the
- 17 facility, regardless of the facility's level of care designation;
- 18 and
- 19 (8) prohibiting the denial of a neonatal or maternal
- 20 level of care designation to a hospital that meets the minimum
- 21 requirements for that level of care designation.
- (b) The Health and Human Services Commission shall study
- 23 patient transfers that are not medically necessary but would be
- 24 cost-effective. Based on the study under this subsection, if the
- 25 executive commissioner determines that the transfers are feasible
- 26 and desirable, the executive commissioner may adopt rules
- 27 addressing those transfers.

- 1 (c) Each level of care designation must require a hospital
- 2 to regularly submit outcome and other data to the department as
- 3 required or requested.
- 4 (d) The criteria a hospital must achieve to receive each
- 5 <u>level of care designation must be posted on the department's</u>
- 6 Internet website.
- 7 Sec. 241.184. ASSIGNMENT OF LEVEL OF CARE DESIGNATION. (a)
- 8 The executive commissioner, in consultation with the department,
- 9 shall assign the appropriate level of care designation to each
- 10 hospital that meets the minimum standards for that level of care.
- 11 The executive commissioner shall evaluate separately the neonatal
- 12 and maternal services provided at the hospital and assign the
- 13 respective level of care designations accordingly.
- 14 (b) Every three years, the executive commissioner and the
- 15 department shall review the level of care designations assigned to
- 16 <u>each hospital and</u>, as necessary, assign a hospital a different
- 17 level of care designation or remove the hospital's level of care
- 18 designation.
- 19 (c) A hospital may request a change of designation at any
- 20 time. On request under this subsection, the executive commissioner
- 21 and the department shall review the hospital's request and, as
- 22 necessary, change the hospital's level of care designation.
- Sec. 241.185. HOSPITAL FAILING TO ACHIEVE MINIMUM LEVELS OF
- 24 CARE. A hospital that does not meet the minimum requirements for
- 25 any level of care designation for neonatal or maternal services:
- 26 (1) may not receive a level of care designation for
- 27 those services; and

- 1 (2) is not eligible to receive reimbursement through
- 2 the Medicaid program for neonatal or maternal services, as
- 3 applicable, except emergency services required to be provided or
- 4 reimbursed under state or federal law.
- 5 Sec. 241.186. PERINATAL ADVISORY COUNCIL. (a) In this
- 6 <u>section</u>, "advisory council" means the Perinatal Advisory Council
- 7 established under this section.
- 8 (b) The advisory council consists of 17 members appointed by
- 9 the executive commissioner as follows:
- 10 (1) four physicians licensed to practice medicine
- 11 under Subtitle B, Title 3, Occupations Code, specializing in
- 12 neonatology:
- 13 (A) at least two of whom practice in a Level III
- 14 or IV neonatal intensive care unit; and
- 15 (B) at least one of whom practices in a neonatal
- 16 <u>intensive care unit of a hospital located in a rural area;</u>
- 17 (2) one physician licensed to practice medicine under
- 18 Subtitle B, Title 3, Occupations Code, specializing in general
- 19 pediatrics;
- 20 (3) two physicians licensed to practice medicine under
- 21 <u>Subtitle B, Title 3, Occupations Code, specializing in</u>
- 22 <u>obstetrics-gynecology;</u>
- 23 (4) two physicians licensed to practice medicine under
- 24 Subtitle B, Title 3, Occupations Code, specializing in maternal
- 25 fetal medicine;
- 26 (5) one physician licensed to practice medicine under
- 27 Subtitle B, Title 3, Occupations Code, specializing in family

- 1 practice who provides obstetrical care in a rural community;
- 2 (6) one registered nurse licensed under Subtitle E,
- 3 Title 3, Occupations Code, with expertise in maternal health care
- 4 delivery;
- 5 (7) one registered nurse licensed under Subtitle E,
- 6 Title 3, Occupations Code, with expertise in perinatal health care
- 7 <u>delivery;</u>
- 8 (8) one representative from a children's hospital;
- 9 (9) one representative from a hospital with a Level II
- 10 neonatal intensive care unit;
- 11 (10) one representative from a rural hospital;
- 12 (11) one representative from a general hospital; and
- 13 (12) one ex officio representative from the office of
- 14 the medical director of the Health and Human Services Commission.
- 15 <u>(c)</u> To the extent possible, the executive commissioner
- 16 shall appoint members to the advisory council who previously served
- 17 on the Neonatal Intensive Care Unit Council established under
- 18 Chapter 818 (H.B. 2636), Acts of the 82nd Legislature, Regular
- 19 Session, 2011.
- 20 (d) Members of the advisory council described by
- 21 Subsections (b)(1)-(11) serve staggered three-year terms, with the
- 22 terms of five or six of those members expiring September 1 of each
- 23 year. A member may be reappointed to the advisory council.
- (e) A member of the advisory council serves without
- 25 compensation but is entitled to reimbursement for actual and
- 26 necessary travel expenses related to the performance of advisory
- 27 council duties.

- 1 (f) The department, with recommendations from the advisory
- 2 council, shall develop a process for the designation and updates of
- 3 levels of neonatal and maternal care at hospitals in accordance
- 4 with this subchapter.
- 5 (g) The advisory council shall:
- 6 (1) develop and recommend criteria for designating
- 7 levels of neonatal and maternal care, respectively, including
- 8 specifying the minimum requirements to qualify for each level
- 9 designation;
- 10 (2) develop and recommend a process for the assignment
- 11 of levels of care to a hospital for neonatal and maternal care,
- 12 respectively;
- 13 (3) make recommendations for the division of the state
- 14 into neonatal and maternal care regions;
- 15 (4) examine utilization trends relating to neonatal
- 16 <u>and maternal care; and</u>
- 17 (5) make recommendations related to improving
- 18 neonatal and maternal outcomes.
- 19 (h) In developing the criteria for the levels of neonatal
- 20 and maternal care, the advisory council shall consider:
- 21 (1) any recommendations or publications of the
- 22 American Academy of Pediatrics and the American Congress of
- 23 Obstetricians and Gynecologists, including "Guidelines for
- 24 Perinatal Care";
- 25 (2) any guidelines developed by the Society of
- 26 Maternal-Fetal Medicine; and
- 27 (3) the geographic and varied needs of citizens of

- 1 this state.
- 2 (i) The advisory council shall submit a report detailing the
- 3 advisory council's determinations and recommendations to the
- 4 department and the executive commissioner not later than September
- 5 1, 2015.
- 6 (j) The advisory council shall continue to update its
- 7 recommendations based on any relevant scientific or medical
- 8 developments.
- 9 (k) The advisory council is subject to Chapter 325,
- 10 Government Code (Texas Sunset Act). Unless continued in existence
- 11 as provided by that chapter, the advisory council is abolished and
- 12 this section expires September 1, 2025.
- SECTION 2. (a) Not later than December 1, 2013, the
- 14 executive commissioner of the Health and Human Services Commission
- 15 shall appoint the members of the Perinatal Advisory Council as
- 16 required by Section 241.186, Health and Safety Code, as added by
- 17 this Act. Notwithstanding Section 241.186(d), Health and Safety
- 18 Code, as added by this Act, the executive commissioner shall
- 19 appoint:
- 20 (1) two members described by Section 241.186(b)(1),
- 21 Health and Safety Code, one member described by Section
- 22 241.186(b)(3), Health and Safety Code, and the members described by
- 23 Sections 241.186(b)(6) and (9), Health and Safety Code, to an
- 24 initial term that expires September 1, 2017;
- 25 (2) one member described by Section 241.186(b)(1),
- 26 Health and Safety Code, one member described by Section
- 27 241.186(b)(3), Health and Safety Code, one member described by

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- 1 Section 241.186(b)(4), Health and Safety Code, and the members
- 2 described by Sections 241.186(b)(2), (7), and (10), Health and
- 3 Safety Code, to an initial term that expires September 1, 2018; and
- 4 (3) one member described by Section 241.186(b)(1),
- 5 Health and Safety Code, one member described by Section
- 6 241.186(b)(4), Health and Safety Code, and the members described by
- 7 Sections 241.186(b)(5), (8), and (11), Health and Safety Code, to
- 8 an initial term that expires September 1, 2019.
- 9 (b) Not later than March 1, 2017, after consideration of the
- 10 report of the Perinatal Advisory Council, the executive
- 11 commissioner of the Health and Human Services Commission shall
- 12 adopt the initial rules required by Section 241.183, Health and
- 13 Safety Code, as added by this Act.
- 14 (c) The executive commissioner of the Health and Human
- 15 Services Commission shall complete for each hospital in this state:
- 16 (1) the neonatal level of care designation not later
- 17 than August 31, 2017; and
- 18 (2) the maternal level of care designation not later
- 19 than August 31, 2019.
- 20 (d) Notwithstanding Section 241.185, Health and Safety
- 21 Code, as added by this Act:
- 22 (1) a hospital is not required to have a neonatal level
- 23 of care designation as a condition of reimbursement through the
- 24 Medicaid program before September 1, 2017; and
- 25 (2) a hospital is not required to have a maternal level
- 26 of care designation as a condition of reimbursement through the
- 27 Medicaid program before September 1, 2019.

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- 1 SECTION 3. If before implementing any provision of this Act
- 2 a state agency determines that a waiver or authorization from a
- 3 federal agency is necessary for implementation of that provision,
- 4 the agency affected by the provision shall request the waiver or
- 5 authorization and may delay implementing that provision until the
- 6 waiver or authorization is granted.
- 7 SECTION 4. This Act takes effect September 1, 2013.